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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/694,661
Filing Date	OCT 27, 2003
First Named Inventor	DONALD S. STERN
Art Unit	2815
Examiner Name	MATTHEW C. LANDAU
Attorney Docket Number	CRAMS- 25 116

P.O. Box 1450 Alexandria, VA 22313-1450  OCT 13 2004  Please withdraw me as attorney or agent for the above identified patent application, and  all the attorneys/agents of record.  the attorneys/agents (with registration numbers) listed on the attached paper(s), or  the attorneys/agents associated with Customer Number  NOTE: This box can only be checked when the power of altorney of record in the application is to all the practitioners associated with a customer number.  The reasons for this request are:  CORRESPONDENCE ADDRESS  1. The correspondence address is NOT affected by this withdrawal. 2. Change the correspondence address and direct all future correspondence to:  The address associated with Customer Number:  OR  Firm or Individual Name MDR RIS S. GETZELS LAW OFFICE  Address  6047 TAMPA AVENUE, SUITE 307  City TARZANA State CA Zip 91356-1176  Country USA  Telephone 818-881-5550 Fax 818-881-5558  Signature S. Ombos:  Name OMKARMURTHY K. SURYABEVARA Registration No. 3 6, 3 20	To: Commissioner for Patents	RECEIVED		
Please withdraw me as attomey or agent for the above identified patent application, and  all the attorneys/agents of record.  the attorneys/agents (with registration numbers) listed on the attached paper(s), or  the attorneys/agents associated with Customer Number  NOTE: This box can only be checked when the power of alterney of record in the application is to all the practitioners associated with a customer number.  The reasons for this request are:  CORRESPONDENCE ADDRESS  1. The correspondence address is NOT affected by this withdrawal. 2. Change the correspondence address and direct all future correspondence to:  The address associated with Customer Number:  OR  Firm or Individual Name MORRIS S. GETZELS LAW OFFICE  Address  6047 TAMPA AVENUE, SUITE 307  City TARZANA State CA Zip 91356-1176  Country USA  Telephone 818-881-5550 Fax 818-881-5558  Signature S. Qamaguer Name OMKARNURTHY K. SURYABEVARA Registration No. 36,320	P.O. Box 1450	CENTRAL FAX CENTE		
all the attorneys/agents of record.     the attorneys/agents (with registration numbers) listed on the attached paper(s), or   the attorneys/agents associated with Customer Number   34036     NOTE: This box can only be checked when the power of altorney of record in the application is to all the practitioners associated with a customer number.    The reasons for this request are:	Alexandria, VA 22313-1450	OCT 13 2004		
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The address associated with Customer Number:  OR    Film or   Individual Name   MORRIS   S. GETZELS   LAW OFFICE     Address   GO47   TAMPA   AVENUE   SUITE   307     City   TARZANA   State   CA   Zip   913561176     Country   USA     Telephone   818-881-5550   Fax   818-881-5558     Signature   S. Onward   Registration No.   36,320     Name   OMKARMURTHY   K. SURYADEVARA   Registration No.   36,320	l r⊽i			
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	Name OMKARMURTHY K. SURYADEVARA Registration No. 5	36,320		
1007 1408-16X-72U3		8-982-8203		
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.				

This collection of information is required by 37 CFR 1.35. The information is required to obtain or rotain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be cent to the Chief Information Officer, U.S. Potent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.